

WAVERLY HEALTH

C E N T E R

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January 8, 2015

VIA ELECTRONIC DELIVERY

Chairman Tom Wheeler
Commissioner Mignon Clyburn
Commissioner Jessica Rosenworcel
Commissioner Ajit Pai
Commissioner Michael O'Rielly
445 12th Street, SW
Room TWA325
Washington, DC 20554

Re: Communication Innovators Petition for Declaratory Ruling
Ex Parte Presentation
CG Docket No. 02-278

Dear Chairman Wheeler and Commissioners Clyburn, Pai, Rosenworcel, and O'Rielly:

On behalf of **Waverly Health Center** we submit these comments in support of the petition filed by American Association of Healthcare Administrative Management (AAHAM).

Waverly Health Center is a small, rural community hospital founded in 1904. We have been striving to meet the health needs of Waverly and surrounding communities for over 100 years. As a non-profit, critical hospital we struggle to find efficient and cost effective ways to hold down costs while providing a high level of care to all patients.

There are a number of time-sensitive, non-telemarketing calls that hospitals and other organizations place to provide important healthcare information to consumers including some that are required by law. For example, under the Affordable Care Act, an insurance exchange must make a "reasonable effort" to contact all applicants who provide information to the

exchange that is inconsistent with the information maintained in official records. The same act also specifically grants federal and state health and human services programs the authority to make notifications of “eligibility, recertification, and other needed communication regarding eligibility” by placing calls to a patient’s or client’s wireless telephone number. Predictive dialers can help organizations comply with these requirements.

In Addition, the new requirements of the Affordable Care Act require hospitals and outpatient clinics to perform post-discharge follow-up with patients to reduce the rate of readmission, a big contributor to the cost of healthcare. We know that the reminders, surveys, and educational outreach that have proven to lower readmission rates can be successfully and cost-effectively conducted by phone. Interpreting the TCPA in a way that facilitates these beneficial non-telemarketing calls is critical to the success of the ACA. Under the TCPA, these calls could potentially subject healthcare providers and other organizations to class-action liability when the patient’s primary contact number is a mobile number.

Furthermore, modern predictive dialing solutions are exponentially more efficient than manual dialing, increasing productivity and lowering costs for consumers. They maximize the amount of time callers spend actually speaking to patients.

The looming threat of TCPA class action liability hinders innovation, increases costs, diverts limited resources away from consumer-facing operations, and threatens job creation efforts. Moreover, confusion about whether certain predictive dialers are autodialers will dissuade organizations including unions and other non-profits from placing consumer-friendly, non-telemarketing calls.[3] Many of these notifications, such as payment confirmations and healthcare reminders provide great benefits to the patient but may not be worth the risk if the caller believes class action liability could result.

Waverly Health Center fully supports the AAHAM petition from the healthcare standpoint for the following reasons:

- The new requirements of the Affordable Care Act require hospitals and outpatient clinics to perform post-discharge follow-up with patients to reduce the rate of readmission, a big contributor to the cost of healthcare. We know the reminders, surveys, and education that have proven to lower readmission rates, can be successfully and cost effectively conducted by phone. Modernizing the TCPA is critical to this effort if the law is going to be effective. Under the TCPA, these calls are high-risk if the patient’s primary contact number is a mobile number and the patient didn’t expressly provide the mobile phone number for that purpose. This is why continuing to push this issue is critical.
- Furthermore, modern predictive dialing solutions are exponentially more efficient than manual dialing, increasing productivity and lowering costs for consumers. They maximize the amount of time callers spend actually speaking to patients.
- The looming threat of TCPA class action liability hinders innovation, increases costs, diverts limited resources away from consumer-facing operations, and threatens job creation efforts. Moreover, confusion about whether certain predictive dialers are autodialers will dissuade organizations – including unions and other non-profits – from placing consumer-friendly, non-telemarketing calls. Many of these notifications, such as

- payment confirmations and healthcare reminders provide great benefits to the patient but may not be worth the risk if the caller believes class action liability could result.
- The Telephone Consumer Protection Act should be amended immediately to improve the communication infrastructure between and among consumers and those service providers with which consumers choose to engage. Proper communication between businesses and consumers is a vital component of a strong consumer protection environment. It ensures consumers are made aware of changes to the status quo that they may not otherwise be made aware of and provides them an opportunity to address pressing issues that stave off otherwise unavoidable, adverse financial action, such as foreclosure, negative credit reporting or litigation. We are not talking about telemarketing calls like some would suggest. Changes to the TCPA would not change any of the current telemarketing rules and regulations.
 - In the healthcare industry if a doctor needs to remind patients of their appointments or their medicine is ready, they have to have real people calling them to remind them of their appointment when in fact this could be done more efficiently and effectively with the use of technology.
 - However, the TCPA prohibits all “person(s)” ***including healthcare providers or their agents*** from contacting consumers on their wireless phones by way of an auto dialer or prerecorded message. Notably, many of these same consumers do not even have landlines. Today 40% of homes do not have landlines and therefore healthcare costs continue to escalate because we cannot utilize technologies making it more effective for us to stay connected to our patients. Modernizing the TCPA would make clear that consumers who provide their wireless numbers to service providers with whom they have a relationship have granted the calling party consent to call them on their cell phone even if the communication is actually initiated by an auto dialer or provides a prerecorded message.

For all these reasons we urge the FCC to grant AAHAM’s petition for Declaratory Ruling. Thank you for the opportunity to submit these comments on behalf of our hospital.

If you have any questions regarding our comments, please feel free to contact me at any time. I can be reached at 319-352-4931.

Pursuant to Section 1.1206(b) of the Commission’s rules, we are filing this notice electronically in the above referenced docket.

Sincerely,

Becky David
Business Office Manager
Waverly Health Center

